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Application Number	10/724,181
Filing Date	12/1/03
First Named Inventor	
Art Unit	
Examiner Name	
Attorney Docket Number	B8-03-2

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

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OR

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>B. Bahramian</i>		
Name	<i>BAHRAM BAHRAMIAN</i>		
Date	12/05/06	Telephone	301 984-9014

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

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